

EARLY VOTING BALLOT TRANSPORT STATEMENT

~This form is to be completed each time the ballot box seal is broken for ballot transport~

At Location

Election Type: General Election


Election Date: 11/08/2022

Name of Location: GILA BEND SCHOOL DISTRICT MEDIA CENTER #10438

Arrival Time: 11:47

Were there ballots to be picked up?

☐ YES <If YES, complete lines 1-7

 NO <If NO, complete lines 1-7

Spoils picked up?

☒ YES ☐ NONE

Completed Forms picked up?

☐ YES ☒ NONE

1) Blue Drop Box Seals # 1522019181 & 1522019181 <Indicate the seal numbers that were **taken off** on blue drop box

2) Blue Drop Box Seals # 1522007057 & 1522007058 - Indicate the seal numbers that were placed on blue drop box

3) Red Box Seals # 1522007059 & 1522007060 <Indicate the seal numbers that were placed on ballot transport box

4) Ballot Box Sealed/Checked on (Date) 11/03/22 (Time) 11:31 <Date and time box was sealed/checked

5) Location Staff Member (Signature)

6) Transport Staff Member (Signature)

7) Transport Staff Member (Signature)

Departure Time: 11:52

Transport Receipt

This portion to be completed by the Receiving Agent at the MCTEC Facility

Receiving Agent (Signature)

Sign to acknowledge receipt from Tran

Date/Time:

11.3.22 3:55pm
Date of Audit Match

Ballot Box Seals # 1S22007059 **&** 1S22007060 <If applicable, verify the seal numbers on the box match the above from location

Blue Drop Box Seals # 1S22019782 **&** 1S22019781 <Indicate the seal numbers that were **broken** from blue drop box

Count of Ballots in Transport Bin

Audit Agent (Signature)

Sign to affirm seal #'s m

Date/Time: _____

11.3.22 3:55

Date of Audit Match

